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·	PATE	N RECORD	TO MICH CARE	Application of Docket Number					
		- PART I (C	olumn 2)	SMALL ENTITY		OR	OTHER THAN OR SMALL ENTITY		
•	FOR	NUMBER FILED	NUME	ER EXTRA	RATE	FEE		RATE	FEE
	(37 CFR 1.16(a))					\$	OR		\$
	TOTAL CLAIMS (37 CFR 1.16(c))	minus 20	= ·		X \$ =		OR	X \$=	\
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3	= •		× \$ =		OR	X \$ =	
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+\$ =		OR	+\$ =	
	* If the difference in column 1 is less than zero, enter "0" in column 2.				TOTAL		OR	TOTAL	
	CLA		L		TOTAL				
8/09/04 AL	(Column 1) (Column 2) (Column 3)				SMALL	ENTITY	OR		R THAN ENTITY
		CLAIMS REMAINING AFTER MENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		AATE	ADDI- TIONAL FEE
	W Total (37 CFR 1.16(b))	// Minus	-20	=	x \$=		ÓR	× \$ =	186
	Z Independent (37 CFR 1,16(b))	Minus	···、3	-	X \$=		OR	X \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+\$ =		OR	+ \$ =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	(	Column 1)	(Column 2)	(Column 3)					
		CLAIMS REMAINING AFTER MENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	Total (37 CFR 1.16(c))  Z Independent (37 CFR 1.16(b))		•	=	X \$ =	FEE	0.5	V	FEE
	Z Independent (37 CFR 1.16(b))	Minus	++	=	x \$ =		OR	x \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+\$ =		OR OR		
					TOTAL ADD'L FEE		OR	+ \$ = TOTAL ADD'L FEE	
	(0	Column 1)	(Column 2)	(Column 3)			OK	YOU'LEE !	
	닐	CLAIMS EMAINING AFTER F MENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	Total (37 CFR 1.16(c))  Z Independent (37 CFR 1.16(b))	Minus **	TAIDFOR	=		FEE			FEE
	Z Independent * (37 CFR 1.16(b))	Minus **		=	X \$=		OR	X \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				X \$=		OR	X \$=	-
	, , , , , , , , , , , , , , , , , , , ,				+\$= TOTAL		OR	+ <u>\$</u> =	
	* If the entry in column	n 1 is less than the entry in per Previously Paid For" IN	column 2, write	"0" in column 3,	ADD'L FEE		OR	ADD'L FEE	
	The "Highest Numbe	er Previously Paid For" IN er Previously Paid For" (Tot	THIS SPACE is al or Independe	lanathan 2 t	***	he annropriato	hovio co	lumo 1	
T T	his collection of informatio	un is required by 27 CER 1	ar or independe	ni) is the nignest	number found in t	ne appropriate	box in co	lumn 1.	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Offica, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.